

MAR 20 2007



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U.S. APPLICATION NUMBER NO.	FIRST NAMED APPLICANT	ATTY. DOCKET NO.
10/574,413	Gilles Lorentz	R03131US

33249
RESOLUTION PERFORMANCE PRODUCTS LLC
ATTN: LISA JONES
1600 SMITH STREET, P.O. BOX 4500
HOUSTON, TX 77210-4500

INTERNATIONAL APPLICATION NO.	
PCT/FR04/02553	
I.A. FILING DATE	PRIORITY DATE
10/08/2004	10/08/2003

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CONFIRMATION NO. 9704

371 FORMALITIES LETTER

OC00000021718166

Date Mailed: 12/22/2006

NOTIFICATION OF MISSING REQUIREMENTS UNDER 35 U.S.C. 371 IN THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US)

The following items have been submitted by the applicant or the IB to the United States Patent and Trademark Office as a Designated / Elected Office (37 CFR 1.495).

- Copy of the International Application filed on 03/31/2006
- English Translation of the IA filed on 03/31/2006
- Copy of the International Search Report filed on 03/31/2006
- Preliminary Amendments filed on 03/31/2006
- Information Disclosure Statements filed on 03/31/2006
- Request for Immediate Examination filed on 03/31/2006
- U.S. Basic National Fees filed on 03/31/2006
- Priority Documents filed on 03/31/2006
- Non-English Language Application filed on 03/31/2006
- Specification filed on 03/31/2006
- Claims filed on 03/31/2006
- Abstracts filed on 03/31/2006
- Drawings filed on 03/31/2006

The applicant needs to satisfy supplemental fees problems indicated below.

The following items **MUST** be furnished within the period set forth below in order to complete the requirements for acceptance under 35 U.S.C. 371:

- Oath or declaration of the inventors, in compliance with 37 CFR 1.497(a) and (b), identifying the application by the International application number and international filing date.
- To avoid abandonment, a surcharge (for late submission of filing fee, search fee, examination fee or oath or declaration) as set forth in 37 CFR 1.492(h) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.

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CENTRAL FAX CENTER****MAR 20 2007****SUMMARY OF FEES DUE:**

Total additional fees required for this application is \$130 for a Large Entity:

- \$130 Surcharge.

ALL OF THE ITEMS SET FORTH ABOVE MUST BE SUBMITTED WITHIN TWO (2) MONTHS FROM THE DATE OF THIS NOTICE OR BY 32 MONTHS FROM THE PRIORITY DATE FOR THE APPLICATION, WHICHEVER IS LATER. FAILURE TO PROPERLY RESPOND WILL RESULT IN ABANDONMENT.

The time period set above may be extended by filing a petition and fee for extension of time under the provisions of 37 CFR 1.136(a).

Applicant is reminded that any communications to the United States Patent and Trademark Office must be mailed to the address given in the heading and include the U.S. application no. shown above (37 CFR 1.5)

Registered users of EFS-Web may alternatively submit their reply to this notice via EFS-Web.
<https://portal.uspto.gov/authenticate/AuthenticateUserLocalEPF.html>

For more information about EFS-Web please call the USPTO Electronic Business Center at 1-866-217-9197 or visit our website at <http://www.uspto.gov/ebc>.

If you are not using EFS-Web to submit your reply, you must include a copy of this notice.

BARBARA A CAMPBELL

Telephone: (703) 308-9140 EXT 217

PART 1 - ATTORNEY/APPLICANT COPY

U.S. APPLICATION NUMBER NO.	INTERNATIONAL APPLICATION NO.	ATTY. DOCKET NO.
10/574,413	PCT/FR04/02553	R03131US

FORM PCT/DO/EO/905 (371 Formalities Notice)

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Hexion Specialty Chemicals, Inc.

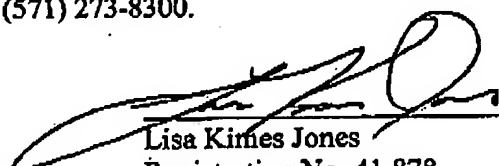
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Houston, TX 77002
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TOTAL PAGES - 11 -

DATE: March 20, 2007

TO: USPTO
PHONE: (571) 272-4100
FAX: (571) 273-8300FROM: Lisa Kimes Jones
PHONE: (832) 366-2571
FAX: (281) 205-2755RE: USSN: 10/574,413
I.A. Filing Date: 10/08/2004
Attorney Docket: R-03131.USCERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence, consisting of a Notice to File Missing Parts (2 pages) an executed Declaration (4 pages), a Request for a One-Month Extension of Time in duplicate and a Fee Transmittal in duplicate are being facsimile transmitted to the United States Patent and Trademark Office, facsimile number (571) 273-8300.

3-20-2007
Date
Lisa Kimes Jones
Registration No. 41,878FACSIMILE TRANSMISSION

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MAR 20 2007

PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**
For FY 2005☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 130.00

Complete if Known

Application Number	10/574,413
Filing Date	10/08/2004
First Named Inventor	LORENTZ, Gilles et al.
Examiner Name	Unassigned
Art Unit	Unassigned
Attorney Docket No.	R-03131.US

METHOD OF PAYMENT (check all that apply)
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: 50-1863 Deposit Account Name: Lisa Kimes Jones

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues) _____
 Each independent claim over 3 (including Reissues) _____
 Multiple dependent claims _____

Total Claims _____ Extra Claims _____ Fee (\$)
 - 20 or HP = _____ x 50 = _____ Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims _____ Extra Claims _____ Fee (\$)
 - 3 or HP = _____ x 200 = _____ Fee Paid (\$)

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets _____ Extra Sheets _____ Number of each additional 50 or fraction thereof _____ Fee (\$)
 - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____ Fee Paid (\$)

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Surcharge for Declaration

Fees Paid (\$)

130.00

SUBMITTED BY

Signature

Name (Print/Type)


 Lisa Kimes Jones
Registration No.
(Attorney/Agent)

41,878

Telephone (832) 366-2571

Date 3-20-2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.